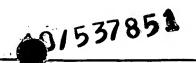
10/55/853 PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA													
			(Colu	fumn 1) (Column 2)				TYPE		OR			
U.S. NATIONAL STAGE FEES								RATE	FEE	7	RATE	FEE	
B/	SIC FEE	SMALL EN	T. = \$ 150	LARGE ENT. = \$ 300		7	BASIC FEE		OR	BASIC FEE			
EXAMINATION FEE			Satisfies PCT (4) = \$5	, ,	All other situations = \$ 100 / \$ 200			EXAM. FEE	<u> </u>		EXAM. FEE	-	
SE	ARCH FEE		U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		All other situations = \$ 250 / \$ 500			SEARCH FEE			SEARCH FEE		
FE	E FOR EXTRA	SPEC. PGS.	miı	nus 100 =		/ 50 =		X \$ 125 =		1	X \$ 250 =		
то	TAL CHARGE	ABLE CLAIMS	m	inus 20 =	*		1	X \$ 25 =		OR	X \$ 50 =		
IN	DEPENDENT C	CLAIMS		minus 3 =	*			X \$ 100 =		OR	X \$ 200 =		
MU	LTIPLE DEPE	NDENT CLAIM PR	ESENT					+ \$ 180 =		OR	+ \$ 360 =		
+	f the difference	ce in column 1 is	less than zer	o, enter "C	" in co	olumn 2		TOTAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						Į.	SMALL ENTITY			OTHER THAN SMALL ENTITY		
MTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AME	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT										OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	- 21	(Column 2)							
ENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ST ER JSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OME	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AMENDM	Independent	•	Minus	***		=	Ī	X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						ſ	+ \$ 180 =		OR	+ \$ 360 =		
							1	OTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													



PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

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	CLAIMS AS FILED - PART I							SMALL EI	NTITY		OTHER THAN	
L			(Colu	mn 1)		(Column 2)	_	TYPE		OR		ENTITY
U.S. NATIONAL STAGE FEES								RATE	FEE		RATE	FEE
ВА	SIC FEE		SMALL EN	T. = \$ 150	LARGE ENT. = \$ 300		7	BASIC FEE		OR	BASIC FEE	300
EX	AMINATION F	EE	Satisfies PCT (4) = \$5		All other situations = \$ 100 / \$ 200		-	EXAM. FEE	1	1	EXAM. FEE	200
SE	ARCH FEE		U.S. is ISA = ALL other of \$ 200 /	ountries =	All other situations = \$ 250 / \$ 500			SEARCH FEE		1	SEARCH FEE	400
FEI	FOR EXTRA	SPEC. PGS.	mir	nus 100 =	K	/ 50 =	1	X \$ 125 =		1	X \$ 250 =	25
то	TAL CHARGE	BLE CLAIMS	43m	inus 20 =	· 24			X \$ 25 =		OR	X \$ 50 =	1200
IND	EPENDENT C	LAIMS	6 1	ninus 3 =	. 3			X \$ 100 =		OR	X \$ 200 =	600
MU	TIPLE DEPEN	IDENT CLAIM PR	RESENT	······································			1	+ \$ 180 =		OR	+ \$ 360 =	360
* 11	the differenc	e in column 1 is	less than zer	o, enter "0	" in c	olumn 2	J	TOTAL		OR	TOTAL	331
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)	1 1	SMALL	ENTITY	OR	OTHER SMALL I	
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AME	Independent	•	Minus	Minus ***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF M	JLTIPLE DEPENDENT CLAIM					+ \$ 180 =		OR	+ \$ 360 =	
										OR	TOTAL ADDIT. FEE	
		(Column 1)		(Columi	n 2)	(Column 3)						
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OME	Total	*	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =	
AMENDM	ndependent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESI	ENTATION OF M	JLTIPLE DEPE	NDENT CL	AIM			+ \$ 180 =		OR	+ \$ 360 =	
							7	FEE		OR -	TOTAL ADDIT. FEE	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". " If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												